

UTILITY
Original U.S. or PCT D/O

DECLARATION, POWER OF ATTORNEY AND POWER TO INSPECT

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name;

that I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the invention entitled: **METHODS OF USING A PATHOGEN-ACTIVATABLE MAP KINASE TO ENHANCE DISEASE RESISTANCE IN PLANTS**

the specification of which (check one(s) applicable)

X was filed 23 February 1999 on International Application No. PCT/US99/03882
and was amended by Amendment filed (if applicable); [or];

is attached to this Declaration, Power of Attorney and Power to Inspect

that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above:

CLAIM UNDER 35 USC §119(e): I hereby claim the benefit under 35 USC §119(e) of any United States provisional applications listed below:

Provisional Application No.

Filing Date
Day/Mo/Yr

60/075,685

24 February 1998

POWER OF ATTORNEY: As inventor, I hereby appoint **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, PA, and the following individual(s) as my attorneys or agents with full power of substitution to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: **Kathleen D. Rigout, Ph.D., J.D. Reg. No. 43,947** and **Patrick J. Hagan, Reg. No. 27,643**

POWER TO INSPECT: I hereby give **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, PA or its duly accredited representatives power to inspect and obtain copies of the papers on file relating to this application.

SEND CORRESPONDENCE TO: CUSTOMER NUMBER 000110 - 000110

DIRECT INQUIRIES TO: Telephone: (215) 563-4100
Facsimile: (215) 563-4044

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST JOINT INVENTOR

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Daniel F. Klessig
First Middle Last

Signature Daniel Klessig

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City State or Country Zip Code

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SOLE OR FIRST JOINT INVENTOR

SECOND JOINT INVENTOR (IF ANY)

Full Name Daniel F. Klessig
First Middle Last

Signature _____

Date _____

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First Middle Last

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Citizenship United States of America

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Columbia Missouri 65203
City State or Country Zip Code

08/24/00 10:58 FAX 215 563 4044

DANN DORFMAN, PHILA

002/002

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant or Patentee: Daniel F. Klessig and Shuqun Zhang

International Application No.: PCT/US99/03882

U.S. Application No.: not yet assigned

International Application Filed: February 23, 1999

U.S. Application Filed: concurrently herewith

For: METHODS OF USING A PATHOGEN-ACTIVATABLE MAP KINASE TO ENHANCE DISEASE RESISTANCE IN PLANTS

**VERIFIED STATEMENT (DECLARATION) SUPPORTING ANOTHER'S CLAIM FOR
SMALL ENTITY STATUS [37 CFR §1.9(f) AND §1.27(d)] - NONPROFIT ORGANIZATION**

I hereby declare that I am making this verified statement to support a claim by the above-identified applicant or patentee for small entity status for purposes of paying reduced fees with regard to the above-identified invention described in

- [] the specification filed herewith
 [X] International Application No. PCT/US99/03882 filed February 23, 1999
 [] U.S. Patent No. _____, issued _____

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

FULL NAME OF ORGANIZATION:

RUTGERS, THE STATE UNIVERSITY OF NEW JERSEY

ADDRESS OF ORGANIZATION:

Old Queens
 Somerset Street
 New Brunswick, New Jersey 08903
 United States of America

TYPE OF ORGANIZATION

- [X] University or other institution of higher education
 [] Tax exempt under U.S. Internal Revenue Code [26 USC§501(a) and
 [] Nonprofit scientific or educational under statute of state of U.S.A.
 Name of State:
 Citation of Statute:
 [] Would qualify as tax exempt under U.S. IRC if located in U.S.A.
 [] Would qualify as nonprofit scientific or educational under statute of
 state of U.S.A if located in U.S.A.
 Name of State:
 Citation of Statute:

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR §1.9(e) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States code to the above-identified invention.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization known to have rights to the invention is listed below* and the organization knows of no rights to the invention being held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR §1.9(c) if that person had made the invention, or by any concern which would not qualify as a small business concern under 37 CFR §1.9(d) or by a nonprofit organization under 37 CFR §1.9(e).

FULL NAME:**ADDRESS:**

[] INDIVIDUAL [] SMALL BUSINESS CONCERN [] NONPROFIT ORGANIZATION

* NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR §1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 CFR §1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name of Person Signing: William T. Adams

Title in Organization: Director, Office of Corporate Liaison and Technology Transfer

Address: ASB Annex II, 58 Bevier Road, Piscataway, New Jersey 08854

Signature:

William T. Adams

Date:

August 24, 2000